

Application Data Sheet

Application Information

Application Type:: Regular
Subject Matter:: Utility
Suggested classification:: None
Suggested Group Art Unit:: None
CD-ROM or CD-R?:: None
Number of CD disks:: 0
Number of copies of CDs:: 0
Sequence submission?:: No
Computer Readable Form (CRF)?:: No
Number of copies of CRF:: 0
Title:: METHODS FOR TREATING LOWER
URINARY TRACT DISORDERS AND THE RELATED DISORDERS VULVODYNIA
AND VULVAR VESTIBULITIS USING CAV2.2 SUBUNIT CALCIUM CHANNEL
MODULATORS
Attorney Docket Number:: 046562/274659
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure:: No
Total Drawing Sheets:: 3
Small Entity:: Yes
Petition Included?:: No
Petition Type:: None
Licensed US Govt. Agency:: No
Contract or Grant Numbers:: No
Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Matthew Oliver
Family Name:: Fraser
Name Suffix::
City of Residence:: Apex
State or Province of Residence:: NC
Country of Residence:: US
Street of mailing address:: 408 Gablefield Lane
City of mailing address:: Apex
State or Province of mailing address:: NC
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 27502

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Karl Bruce
Family Name:: Thor
Name Suffix::
City of Residence:: Morrisville
State or Province of Residence:: NC
Country of Residence:: US
Street of mailing address:: 109 Draymore Way
City of mailing address:: Morrisville
State or Province of mailing address:: NC
Country of mailing address:: US
Postal or Zip Code of mailing address:: 27506

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Edward C.
Family Name:: Burgard
Name Suffix::
City of Residence:: Chapel Hill
State or Province of Residence:: NC
Country of Residence:: US
Street of mailing address:: 215 Cates Farm Road
City of mailing address:: Chapel Hill
State or Province of mailing address:: NC
Country of mailing address:: US
Postal or Zip Code of mailing address:: 27516

Correspondence Information

Correspondence Customer Number:: 00826

Representative Information

Representative Customer Number:: 00826

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Utility of	60/453,171	03/10/03

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name:: Dynogen Pharmaceuticals, Inc.
Street of mailing address:: 31 St. James Avenue, Suite 905
City of mailing address:: Boston
State or Province of mailing address:: MA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 02116

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